

schools, postsecondary vocational schools, community and junior colleges, and in colleges and universities. Postsecondary programs usually last either 1 year, resulting in a certificate or diploma, or 2 years, resulting in an associate degree. Courses cover anatomy, physiology, and medical terminology as well as typing, transcription, recordkeeping, accounting, and insurance processing. Students learn laboratory techniques, clinical and diagnostic procedures, pharmaceutical principles, medication administration, and first aid. They study office practices, patient relations, medical law, and ethics. Accredited programs include an internship that provides practical experience in physicians' offices, hospitals, or other health care facilities.

Although formal training in medical assisting is available, such training—while generally preferred—is not always required. Some medical assistants are trained on the job, although this is less common than in the past. Applicants usually need a high school diploma or the equivalent. Recommended high school courses include mathematics, health, biology, typing, bookkeeping, computers, and office skills. Volunteer experience in the health care field is also helpful.

Two agencies recognized by the U.S. Department of Education accredit programs in medical assisting: the Commission on Accreditation of Allied Health Education Programs (CAAHEP) and the Accrediting Bureau of Health Education Schools (ABHES). In 1999, there were about 450 medical assisting programs accredited by CAAHEP and over 140 accredited by ABHES. The Committee on Accreditation for Ophthalmic Medical Personnel accredited 14 programs in ophthalmic medical assisting.

Although there is no licensing for medical assistants, some States require them to take a test or a short course before they can take x rays or perform other specific clinical tasks. Employers prefer to hire experienced workers or certified applicants who have passed a national examination, indicating that the medical assistant meets certain standards of competence. The American Association of Medical Assistants awards the Certified Medical Assistant credential; the American Medical Technologists awards the Registered Medical Assistant credential; the American Society of Podiatric Medical Assistants awards the Podiatric Medical Assistant Certified credential; and the Joint Commission on Allied Health Personnel in Ophthalmology awards the Ophthalmic Medical Assistant credential at three levels: Certified Ophthalmic Assistant, Certified Ophthalmic Technician, and Certified Ophthalmic Medical Technologist.

Because medical assistants deal with the public, they must be neat and well-groomed and have a courteous, pleasant manner. Medical assistants must be able to put patients at ease and explain physicians' instructions. They must respect the confidential nature of medical information. Clinical duties require a reasonable level of manual dexterity and visual acuity.

Medical assistants may be able to advance to office manager. They may qualify for a variety of administrative support occupations, or may teach medical assisting. Some, with additional education, enter other health occupations such as nursing and medical technology.

### Job Outlook

Employment of medical assistants is expected to grow much faster than the average for all occupations through the year 2008 as the health services industry expands due to technological advances in medicine, and a growing and aging population. It is one of the fastest growing occupations.

Employment growth will be driven by the increase in the number of group practices, clinics, and other health care facilities that need a high proportion of support personnel, particularly the flexible medical assistant who can handle both administrative and clinical duties. Medical assistants primarily work in outpatient settings, where much faster than average growth is expected.

In view of the preference of many health care employers for trained personnel, job prospects should be best for medical assistants with formal training or experience, particularly those with certification.

### Earnings

The earnings of medical assistants vary, depending on experience, skill level, and location. Median annual earnings of medical assistants were \$20,680 in 1998. The middle 50 percent earned between \$17,020 and \$24,340 a year. The lowest 10 percent earned less than \$14,020 and the highest 10 percent earned more than \$28,640 a year. Median annual earnings in the industries employing the largest number of medical assistants in 1997 were as follows:

Offices and clinics of medical doctors .....	\$20,800
Hospitals .....	20,400
Offices of osteopathic physicians .....	19,600
Health and allied services, nec .....	19,300
Offices of other health practitioners .....	18,500

### Related Occupations

Workers in other medical support occupations include medical secretaries, hospital admitting clerks, pharmacy helpers, medical record clerks, dental assistants, occupational therapy aides, and physical therapy aides.

### Sources of Additional Information

Information about career opportunities, CAAHEP-accredited educational programs in medical assisting, and the Certified Medical Assistant exam is available from:

☛ The American Association of Medical Assistants, 20 North Wacker Dr., Suite 1575, Chicago, IL 60606-2903.

Internet: <http://www.aama-ntl.org>

Information about career opportunities and the Registered Medical Assistant certification exam is available from:

☛ Registered Medical Assistants of American Medical Technologists, 710 Higgins Rd., Park Ridge, IL 60068-5765.

Internet: <http://www.amt1.com>

For a list of ABHES-accredited educational programs in medical assisting, write:

☛ Accrediting Bureau of Health Education Schools, 803 West Broad St., Suite 730, Falls Church, VA 22046. Internet: <http://www.abhes.org>

For information about a career as a medical assistant and schools offering training, contact:

☛ National Association of Health Career Schools, 2301 Academy Dr., Harrisburg, PA 17112.

Information about career opportunities, training programs, and the Certified Ophthalmic Assistant exam is available from:

☛ Joint Commission on Allied Health Personnel in Ophthalmology, 2025 Woodlane Dr., St. Paul, MN 55125-2995.

Internet: <http://www.jcahpo.org>

Information about careers for podiatric assistants is available from:

☛ American Society of Podiatric Medical Assistants, 2124 S. Austin Blvd., Cicero, IL 60650.

## Nursing and Psychiatric Aides

(O\*NET 66008 and 66014)

### Significant Points

- Job prospects for nursing aides will be good because of fast growth and high turnover in this large occupation.
- Minimum education or training is generally required for entry level jobs, but earnings are low.

### Nature of the Work

Nursing and psychiatric aides help care for physically or mentally ill, injured, disabled, or infirm individuals confined to hospitals, nursing or residential care facilities, and mental health settings. (Home health and personal care aides, whose duties are similar but who work in clients' homes, are discussed elsewhere in the *Handbook*.)



*Nursing aides assist nurses in caring for the elderly, usually in nursing homes.*

**Nursing aides**, also known as nursing assistants, geriatric aides, unlicensed assistive personnel, or hospital attendants, perform routine tasks under the supervision of nursing and medical staff. They answer patients' call bells, deliver messages, serve meals, make beds, and help patients eat, dress, and bathe. Aides may also provide skin care to patients; take temperatures, pulse, respiration, and blood pressure; and help patients get in and out of bed and walk. They may also escort patients to operating and examining rooms, keep patients' rooms neat, set up equipment, or store and move supplies. Aides observe patients' physical, mental, and emotional conditions and report any change to the nursing or medical staff.

Nursing aides employed in nursing homes are often the principal caregivers, having far more contact with residents than other members of the staff. Since some residents may stay in a nursing home for months or even years, aides develop ongoing relationships with them and interact with them in a positive, caring way.

**Psychiatric aides** are also known as mental health assistants and psychiatric nursing assistants. They care for mentally impaired or emotionally disturbed individuals. They work under a team that may include psychiatrists, psychologists, psychiatric nurses, social workers, and therapists. In addition to helping patients dress, bathe, groom, and eat, psychiatric aides socialize with them and lead them in educational and recreational activities. Psychiatric aides may play games such as cards with the patients, watch television with them, or participate in group activities such as sports or field trips. They observe patients and report any physical or behavioral signs which might be important for the professional staff to know. They accompany patients to and from wards for examination and treatment. Because they have the closest contact with patients, psychiatric aides have a great deal of influence on their outlook and treatment.

### Working Conditions

Most full-time aides work about 40 hours a week, but because patients need care 24 hours a day, some aides work evenings, nights, weekends, and holidays. Many work part-time. Aides spend many hours standing and walking, and they often face heavy workloads. Because they may have to move patients in and out of bed or help them stand or walk, aides must guard against back injury. Nursing aides may also face hazards from minor infections and major diseases such as hepatitis, but can avoid infections by following proper procedures.

Nursing aides often have unpleasant duties; they empty bed pans and change soiled bed linens. The patients they care for may be disoriented, irritable, or uncooperative. Psychiatric aides must be prepared to care for patients whose illness may cause violent behavior. While their

work can be emotionally demanding, many aides gain satisfaction from assisting those in need.

### Employment

Nursing aides held about 1.4 million jobs in 1998, and psychiatric aides held about 95,000 jobs. About one-half of all nursing aides worked in nursing homes, and about one-fourth worked in hospitals. Others worked in residential care facilities, such as halfway houses and homes for the aged or disabled, or in private households. Most psychiatric aides worked in psychiatric units of general hospitals, psychiatric hospitals, State and county mental institutions, homes for mentally retarded and psychiatric patients, and community mental health centers.

### Training, Other Qualifications, and Advancement

In many cases, neither a high school diploma nor previous work experience is necessary for a job as a nursing or psychiatric aide. A few employers, however, require some training or experience. Hospitals may require experience as a nursing aide or home health aide. Nursing homes often hire inexperienced workers who must complete a minimum of 75 hours of mandatory training and pass a competency evaluation program within 4 months of employment. Aides who complete the program are placed on the State registry of nursing aides. Some States require psychiatric aides to complete a formal training program.

These occupations can offer individuals an entry into the world of work. The flexibility of night and weekend hours also provides high school and college students a chance to work during the school year.

Nursing aide training is offered in high schools, vocational-technical centers, some nursing homes, and community colleges. Courses cover body mechanics, nutrition, anatomy and physiology, infection control, communication skills, and resident rights. Personal care skills such as how to help patients bathe, eat, and groom are also taught.

Some facilities, other than nursing homes, provide classroom instruction for newly hired aides, while others rely exclusively on informal on-the-job instruction from a licensed nurse or an experienced aide. Such training may last several days to a few months. From time to time, aides may also attend lectures, workshops, and in-service training.

Applicants should be healthy, tactful, patient, understanding, emotionally stable, dependable, and have a desire to help people. They should also be able to work as part of a team, have good communication skills, and be willing to perform repetitive, routine tasks.

Opportunities for advancement within these occupations are limited. To enter other health occupations, aides generally need additional formal training. Some employers and unions provide opportunities by simplifying the educational paths to advancement. Experience as an aide can also help individuals decide whether to pursue a career in the health care field.

### Job Outlook

Job prospects for nursing aides should be good through the year 2008. Numerous openings will arise from a combination of fast growth and high turnover for this large occupation. Employment of nursing aides is expected to grow faster than the average for all occupations in response to an emphasis on rehabilitation and the long-term care needs of a rapidly growing elderly population. Employment will increase as a result of the expansion of nursing homes and other long-term care facilities for people with chronic illnesses and disabling conditions, many of whom are elderly. Financial pressure on hospitals to release patients as soon as possible should produce more nursing home admissions. Modern medical technology will also increase the employment of nursing aides. This technology, while saving and extending more lives, increases the need for long-term care provided by aides. As a result, nursing and personal care facilities are expected to grow rapidly and to provide most of the new jobs for nursing aides.

Employment of psychiatric aides is expected to grow slower than the average for all occupations. Employment will rise in response to the sharp increase in the number of older persons—many of whom will require mental health services. Employment of aides in outpatient

community mental health centers is likely to grow because of increasing public acceptance of formal treatment for drug abuse and alcoholism, and a lessening of the stigma attached to those receiving mental health care. However, employment in hospitals—where one-half of psychiatric aides work—is likely to decline due to attempts to contain costs by limiting inpatient psychiatric treatment.

Replacement needs will constitute the major source of openings for aides. Turnover is high, a reflection of modest entry requirements, low pay, and lack of advancement opportunities.

### Earnings

Median hourly earnings of nursing aides, orderlies, and attendants were \$7.99 in 1998. The middle 50 percent earned between \$6.72 and \$9.54 an hour. The lowest 10 percent earned less than \$5.87 and the highest 10 percent earned more than \$11.33 an hour. Median hourly earnings in the industries employing the largest number of nursing aides, orderlies, and attendants in 1997 were as follows:

Local government, except education and hospitals .....	\$9.20
Hospitals .....	8.10
Personnel supply services .....	8.10
Nursing and personal care facilities .....	7.50
Residential care .....	7.20

Median hourly earnings of psychiatric aides were \$10.66 in 1998. The middle 50 percent earned between \$8.33 and \$13.36 an hour. The lowest 10 percent earned less than \$6.87 and the highest 10 percent earned more than \$15.28 an hour. Median hourly earnings of psychiatric aides in 1997 were \$11.20 in State government and \$9.80 in hospitals.

Aides in hospitals generally receive at least 1 week's paid vacation after 1 year of service. Paid holidays and sick leave, hospital and medical benefits, extra pay for late-shift work, and pension plans also are available to many hospital and some nursing home employees.

### Related Occupations

Nursing and psychiatric aides help people who need routine care or treatment. So do home health and personal care aides, child-care workers, companions, occupational therapy aides, and physical therapy aides.

### Sources of Additional Information

Information about employment opportunities may be obtained from local hospitals, nursing homes, psychiatric facilities, State boards of nursing and local offices of the State employment service.

For information about a career as a nursing aide and schools offering training, contact:

☛ National Association of Health Career Schools, 2301 Academy Dr., Harrisburg, PA 17112.

## Occupational Therapy Assistants and Aides

(O\*NET 66021)

### Significant Points

- Qualifications of occupational therapy assistants are regulated by the States and these workers must complete an associate's degree or certificate program. In contrast, occupational therapy aides usually receive most of their training on the job.
- Aides are not licensed, so by law they are not allowed to perform as wide a range of tasks as occupational therapy assistants do.



*Occupational therapy assistants and aides help disabled patients function in home settings.*

- Employment is projected to increase over the 1998-2008 period, but due to the effects of Federal limits on reimbursement for therapy services, the majority of expected employment growth is expected to occur during the second half of the projection period.

### Nature of the Work

Occupational therapy assistants and aides work under the direction of occupational therapists to provide rehabilitative services to persons with mental, physical, emotional, or developmental impairments. The ultimate goal is to improve clients' quality of life by helping them compensate for limitations. For example, occupational therapy assistants help injured workers re-enter the labor force by helping them improve their motor skills or help persons with learning disabilities increase their independence, by teaching them to prepare meals or use public transportation.

*Occupational therapy assistants* help clients with rehabilitative activities and exercises outlined in a treatment plan developed in collaboration with an occupational therapist. Activities range from teaching the proper method of moving from a bed into a wheelchair, to the best way to stretch and limber the muscles of the hand. Assistants monitor an individual's activities to make sure they are performed correctly and to provide encouragement. They also record their client's progress for use by the occupational therapist. If the treatment is not having the intended effect, or the client is not improving as expected, the therapist may alter the treatment program in hopes of obtaining better results. In addition, occupational therapy assistants document billing of the client's health insurance provider.

*Occupational therapy aides* typically prepare materials and assemble equipment used during treatment and are responsible for a range of clerical tasks. Duties can include scheduling appointments, answering the telephone, restocking or ordering depleted supplies, and filling out insurance forms or other paperwork. Aides are not licensed, so by law they are not allowed to perform as wide a range of tasks as occupational therapy assistants do.

### Working Conditions

Occupational therapy assistants and aides usually work during the day, but may occasionally work evenings or weekends, to accommodate a client's schedule. These workers should be in good physical condition, because they are on their feet for long periods of time and may be asked to help lift and move clients or equipment.